

City of Lake Stevens

Application for Employment

Directions:

1. Review and complete this entire application packet. You must submit a separate application for each position.
2. Read the Position Opening Announcement to see if a Supplemental Questionnaire is required.
3. Resumes may be attached to your original application.
4. Once you have completed the application, print the documents and save a copy for your records.
5. Sign and date a copy of the required documents and send them to the Lake Stevens Human Resources Department. Only original applications with signatures will be accepted.

Complete all information. Resumes will not substitute for this application. An incomplete application may disqualify you from further consideration.





Application for Employment

Position Applied for:

--

PERSONAL INFORMATION

Name: _____
Last First Middle

Address: _____
Street City State Zip

Mailing: _____
Mailing Address City State Zip

E-Mail Address: _____

Home Phone: _____ Contact Phone: _____

Social Security #: _____
(Optional)

Do you have a valid Washington Driver's License? ☐ Yes ☐ No License #: _____

Are you 18 years or older? ☐ Yes ☐ No

Are you prevented from lawfully working in the United States by visa or immigration status? ☐ Yes ☐ No
(Documentation of authorization to work in the U.S. will be required if an offer of employment is made and accepted).

TRAINING AND EDUCATION

High School: _____ Did you graduate? ☐ Yes ☐ No GED? ☐ Yes ☐ No

Colleges Attended:

Name of College/Location:

Dates:

Degree or # of Credits:

_____	_____/_____/_____	_____
_____	_____/_____/_____	_____
_____	_____/_____/_____	_____

Other Courses/Training:

Location/Length of Course:

Date:

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

EQUIPMENT, OFFICE AND COMPUTER SKILLS

Describe your computer and other equipment operation skills. Include programs used, typing speed and other information relevant to the position for which you are applying.

PROFESSIONAL REFERENCES (Do Not List Relatives)

Name/Title: _____	Employer: _____	Phone () _____
Name/Title: _____	Employer: _____	Phone () _____
Name/Title: _____	Employer: _____	Phone () _____

OTHER INFORMATION

Are you a former City of Lake Stevens Employee? ☐ Yes ☐ No

Job Title _____	Date Employed _____
-----------------	---------------------

Relatives Employed by the City of Lake Stevens? ☐ Yes ☐ No

Name _____	Relationship _____	Department _____
------------	--------------------	------------------

Beginning with your present or most recent employment, list your work/experience history in the last 10 years or experience prior to that time which is directly related to the position for which you are applying. Attach additional sheets as necessary. Be sure to include any non-paid experience which is related to the job for which you are applying.

Complete the following sections even if you are submitting a resume in addition to this application. An incomplete application may disqualify you. If currently employed, please state why you are interested in leaving your current job. If you have been known by a different name by any of these employers, please identify the employer and state the name here: _____

WORK HISTORY

Past or Present Employer:		Dates Employed: From: _____ To: _____
Address:		Ending Salary:
Supervisor:	Telephone Number:	Your Job Title:
May we contact your supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No		Number hours worked/week:
Reason for Leaving, or Wanting to Leave, this Employer:		
Primary Duties (List Specific Work Performed): _____ _____ _____		

Past or Present Employer:		Dates Employed: From: _____ To: _____
Address:		Ending Salary:
Supervisor:	Telephone Number:	Your Job Title:
May we contact your supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No		Number hours worked/week:
Reason for Leaving, or Wanting to Leave, this Employer:		
Primary Duties (List Specific Work Performed): _____ _____ _____		

Past or Present Employer:		Dates Employed: From: _____ To: _____
Address:		Ending Salary:
Supervisor:	Telephone Number:	Your Job Title:
May we contact your supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No		Number hours worked/week:
Reason for Leaving, or Wanting to Leave, this Employer:		
Primary Duties (List Specific Work Performed): _____ _____ _____		

Past or Present Employer:		Dates Employed: From: _____ To: _____
Address:		Ending Salary:
Supervisor:	Telephone Number:	Your Job Title:
May we contact your supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No		Number hours worked/week:
Reason for Leaving, or Wanting to Leave, this Employer:		
Primary Duties (List Specific Work Performed): _____ _____ _____		

PLEASE READ CAREFULLY BEFORE SIGNING THIS APPLICATION

To the best of my knowledge, the information herein is true and complete. I have read the Position Opening Announcement and I can perform the essential functions of the position for which I am applying, with or without reasonable accommodation. I understand that if I receive a Conditional Offer of Employment for a position where I will have unsupervised access to children, developmentally disabled persons, or vulnerable adults, the City of Lake Stevens is authorized to complete a thorough background check pursuant to the Child/Adult Abuse Information Act. I understand that I will be tested for the presence of drugs as part of the pre-employment screening if I receive a Conditional Offer of Employment for a position which requires a Commercial Driver's License. I authorize investigation of all statements in this application.

I understand that providing false information on this application is grounds for disqualification and/or dismissal. If I am applying for an exempt position, I understand that nothing in this application or my communications with any City of Lake Stevens official is intended to create an employment contract between the City of Lake Stevens and me.

Signature: _____

Date: _____

Return signed, completed originals to:

**City of Lake Stevens
Attn: Human Resources Department
P.O. Box 257, 1812 Main Street
Lake Stevens, WA 98258
(425) 377-3227**

This City is an Equal Opportunity Employer and does not unlawfully discriminate on the basis of race, sex, age, color, religion, national origin, marital status, disability, or any other basis prohibited by federal, state, or local law.



AUTHORIZATION TO RELEASE EMPLOYMENT RECORDS

References will only be checked for finalists.

Current and/or prior employers will only be contacted after an applicant has been notified that he/she is a finalist. I certify that the information given by me to the City of Lake Stevens is true and complete to the best of my knowledge. I understand that falsification of this application will be grounds for elimination from further consideration or, if employed, may result in discipline up to and including immediate dismissal. I further certify that I am not engaged in any outside activity or business that could be considered in conflict with the City of Lake Stevens interest or those of its clients, nor will I become engaged in such activity or business if employed.

I, the undersigned applicant for employment with the City of Lake Stevens, in consideration of the review of my employment application, do authorize the City of Lake Stevens to solicit information regarding my character, general reputation, previous employment, and similar background information, and to contact any and all prior employers or references I have given on my application. I hereby release all parties and persons connected with any such request for information from all claims, liabilities, and damages for any reason arising out of the furnishing of such information. If employed, I release the City of Stevens from any liability for future references it may provide regarding my work history at the City of Lake Stevens.

If employed, I further agree that if I lose, damage, or fail to return any of the City of Lake Stevens's property, the City of Lake Stevens is authorized to deduct from my wages sufficient reasonable funds to replace its property.

It is my intention that any copy of this authorization be as effective as the original.

Date: _____

Name (Please Print): _____

Signature: _____



DRIVING RECORD
(To be completed with application)

Name: _____
Please Print Last First MI

List all notices of infractions or traffic citations (other than parking tickets) which you have received in the past 5 years.

State	Month/Year	Type of Infraction

Infractions or citations will not necessarily remove you from consideration. The City of Lake Stevens will; however, consider your driving record when making employment decisions.

The information provided above is true to the best of my knowledge. I understand that providing false information is cause for elimination in the selection process or dismissal from employment.

Signed: _____ Date: _____

Finalists, upon notification that references will be checked, may be required to submit a copy of their driving abstract to Human Resources. Driving abstracts may be obtained at any Washington State Department of Licensing branch office for a small fee. Other states may have different procedures. This fee is at the Finalist's own expense.

[Member name] Driving Standards:

Applicants for positions in which the employee is expected to operate a motor vehicle must be at least 18 years old and will be required to present a valid Washington State driver's license with any necessary endorsements. Driving records of applicants may be checked. Applicants will be disqualified under the following circumstances:

- Violations: More than two moving traffic violations within the preceding three years; or reckless driving violation within the preceding five years; or driving while intoxicated within the preceding five years.
- Accidents: More than one motor vehicle accident within the preceding three years for which the applicant received a traffic or criminal citation and was convicted, forfeited bail, or entered a plea of "guilty" or "nolo contendere."



AFFIRMATIVE ACTION INFORMATION

Position Applied: _____

The City of Lake Stevens provides equal opportunity in all terms, conditions and privileges of employment for all qualified job applicants and employees without regard to race, color, national origin, sex, age, marital status, veteran status, sexual orientation or the presence of disability. **Providing this information is voluntary and will be kept in a confidential file separate from the application form.**

Sex: Male ☐

Female ☐

Age: Below 18 ☐

Above 18 but below 40 ☐

Above 40 ☐

Ethnic Category:

☐

Caucasian

☐

African American

☐

Hispanic

☐

Native American

☐

Asian

☐

Pacific Islander

☐

Other Specify _____

FITNESS FOR DUTY

Can you perform the essential functions of the job, with or without reasonable accommodation (See job description)?

Yes ☐ No ☐

RECRUITMENT INFORMATION

How did you hear about the position for which you are applying?

☐

Friend or relative

☐

City Job Bulletin

☐

City Employee

☐

City Website

☐

Newspaper Ad

Name of newspaper: _____

☐

Other

Please specify: _____